

NON ROUTINE WORK

							SKILL	CSN
ORIGINATED BY		ITEM:						
AUTHORIZED BY								
TECHNICIAN								
INSPECTOR								
P/N ON		CORRECTION:						
S/N ON								
S/N OFF								
NOMENCLATURE								
N-	INSP. NO.	DATE	CARD NO.	ITEM NO.	SEV. COD.	INSP. REQ.	WORK ORDER #	COST ACTG #

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P/N ON		CORRECTION:						
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